FETCH! AUDITION APPLICATION
ALL INFORMATION IS REQUIRED

CHILD'S NAME:_____

CHILD'S DOB:_____

PARENT'S EMAIL:_____

PHONE NUMBER:_____

ADDRESS:_____

_____

PREFERRED AUDITION DATE

SAT JAN 9TH SUN JAN 10TH

WHAT ARE YOUR INTERESTS OR EXTRACURRICULAR ACTIVITIES?

YOU MUST PRINT, SIGN AND BRING A COPY OF THIS APPLICATION AND A RECENT PHOTO WITH YOU TO YOUR AUDITION!!!!!!

PARENT/GUARDIAN SIGNATURE_____